

11/30/00

**UTILITY  
PATENT APPLICATION  
TRANSMITTAL**

Attorney Docket No.	200133US2
First Inventor or Application Identifier	Yoichi KANAI
Title	SYSTEM, METHOD AND COMPUTER READABLE MEDIUM FOR CERTIFYING RELEASE OF ELECTRONIC INFORMATION ON AN INTERNET

APPLICATION ELEMENTS		ADDRESS TO:	Assistant Commissioner for Patents Box Patent Application Washington, DC 20231
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g. PTO/SB/17) (Submit an original and a duplicate for fee processing)			
2. <input checked="" type="checkbox"/> Specification	Total Sheets	<b>40</b>	
3. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113)	Total Sheets	<b>16</b>	
4. <input type="checkbox"/> Oath or Declaration	Total Pages	<input type="text"/>	
a. <input type="checkbox"/> Newly executed (original or copy)			
b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. §1.63(d)) (for continuation / divisional w/ box 16 completed)			
i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §1.63(d)(2) and 1.33(b).			
5. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)			
6. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)			
a. <input type="checkbox"/> Computer Readable Form (CRF)			
b. Specification or Sequence Listing on:			
i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or			
ii. <input type="checkbox"/> Paper			
c. <input type="checkbox"/> Statements verifying identity of above copies			
16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below:			
<input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP)      of prior application no.:			
Prior application information:      Examiner:      Group Art Unit:			
For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.			
17. Amend the specification by inserting before the first line the sentence:			
<input type="checkbox"/> This application is a <input type="checkbox"/> Continuation <input type="checkbox"/> Division <input type="checkbox"/> Continuation-in-part (CIP) of application Serial No.      Filed on			
<input type="checkbox"/> This application claims priority of provisional application Serial No.      Filed			
18. CORRESPONDENCE ADDRESS			
 <b>22850</b> (703) 413-3000 FACSIMILE: (703) 413-2220			

Name:	Gregory J. Maier	Registration No.:	25,599
Signature:		Date:	11-30-00
Name:	Surinder Sachar	Registration No.:	34,423

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

INVENTOR(S) Yoichi KANAI ET AL

SERIAL NO: New Application

FILING DATE: Herewith

FOR: SYSTEM, METHOD AND COMPUTER READABLE MEDIUM FOR CERTIFYING RELEASE OF...

## FEE TRANSMITTAL

ASSISTANT COMMISSIONER FOR PATENTS  
WASHINGTON, D.C. 20231JC918 U.S. PTO  
09/725515  
11/30/00  


FOR	NUMBER FILED	NUMBER EXTRA	RATE	CALCULATIONS
TOTAL CLAIMS	82 - 20 =	62	× \$18 =	\$1,116.00
INDEPENDENT CLAIMS	5 - 3 =	2	× \$80 =	\$160.00
■ MULTIPLE DEPENDENT CLAIMS (If applicable)			+ \$270 =	\$270.00
■ LATE FILING OF DECLARATION			+ \$130 =	\$130.00
			BASIC FEE	\$710.00
			TOTAL OF ABOVE CALCULATIONS	\$2,386.00
<input type="checkbox"/> REDUCTION BY 50% FOR FILING BY SMALL ENTITY				\$0.00
<input type="checkbox"/> FILING IN NON-ENGLISH LANGUAGE			+ \$130 =	\$0.00
<input type="checkbox"/> RECORDATION OF ASSIGNMENT			+ \$40 =	\$0.00
			TOTAL	\$2,386.00

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A duplicate copy of this sheet is enclosed.

 A check in the amount of \$2,386.00 to cover the filing fee is enclosed. The Commissioner is hereby authorized to charge any additional fees which may be required for the papers being filed herewith and for which no check is enclosed herewith, or credit any overpayment to Deposit Account No. 15-0030.  
A duplicate copy of this sheet is enclosed.

Respectfully Submitted,

OBLON, SPIVAK, McCLELLAND,  
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Date: 11-30-00

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